Approved for use through 11/30/2011. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number.

## **PATENT - POWER OF ATTORNEY** OR **REVOCATION OF POWER OF ATTORNEY** WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Patent Number	7,176,795	1		
Issue Date	February 13, 2007			
First Named Inventor	Frode Roed			
Title	Method and Device for Protection of Personnel			
Attorney Docket Number	1814-56400	_		

I hereby revoke all previous powers of attorney given in the above-identified patent.									
	A Power of Attorney is submitted herewith.								
OR	·	·							
X	I hereby appoint Practitioner(s) associated with tattornev(s) or agent(s) with respect to the paten	appoint Practitioner(s) associated with the following Customer Number as my/our (s) or agent(s) with respect to the patent identified above, and to transact all business in ad States Patent and Trademark Office connected therewith:							
OR	the United States Patent and Trademark Office								
	I hereby appoint Practitioner(s) named below as above, and to transact all business in the United	appoint Practitioner(s) named below as my/our attorney(s) or agent(s) with respect to the patent identified and to transact all business in the United States Patent and Trademark Office connected therewith:							
	Practitioner(s) Name		Registration Number						
				MA I I I I I I I I I I I I I I I I I I I					
	***************************************								
	***************************************			,,					
Please recognize or change the correspondence address for the above-identified patent to:									
─────────────────────────────────────									
The address associated with Customer Number:									
OF									
	Firm or ndividual Name			WITTER 113 - 113 - 114 - 115 -	V 1973				
Addres	,	11 (11 (11 (11 (11 (11 (11 (11 (11 (11		NO. 1007 HEIGH					
City				7-					
Country		36	tate	Zlp					
Teleph		Er	mall	·					
l am the									
 OF	nventor, having ownership of the patent.								
	Patent owner. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) su	chmilled berewith or	- filad an		•				
SIGNATURE of Inventor or Patent Owner									
Signat			Date	9 16	1-10				
Name	GEIR SKAUGEN		Tele	phone	- Promise and the second				
Title and Company Development Manager NAI									
NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
*Total of forms are submitted.									

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patent R.O. Roy 1450, Alexandria, VA 23313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.